

MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL PROTECTION  
**CLEAN WATER STATE REVOLVING FUND (CWSRF)**  
 CALENDAR YEAR 2005 PROJECT EVALUATION

**Project Checklist/Rating Form**

Reviewer:

LGU:

Review Date:

Project No. (from Item 4 of Part I):

**A. Project Summary – Description, Objectives, and Planning Basis**

**Refer to the Instructions and Guidance. Use the checklist to confirm that the project narrative has adequately described the project and its benefits. (Check)**

Project objectives; documentation of public health and water quality issues to be addressed.	
Scope of project, key facilities or tasks; environmental benefits.	
Identification of project area, site plan/project map.	
Planning basis of project; copy of pertinent pages of approved planning document.	
Basis of cost estimate; engineer's estimate for construction projects	

**B. Public Health Criteria**

Item No.	Pts	I. What is the cause of the public health problem or nuisance that the project will address? (Points)	Page Number in Narrative	Attachment ID & Page No.
1	3	Contaminated stormwater		
2	4	Illicit connection to stormwater system		
3	5	Combined Sewer Overflows >50/year		
	4	11 – 50/year		
	3	1 – 10/year		
4	5	Widespread septic system failure		
5	5	Raw sewage back-up from municipal system		
6	5	Sanitary Sewer Overflow >3/year		
	4	3/year		
	3	1 – 2/year		
7	1	Water pollution related odor problem		
8	2	Landfill leachate		
9	2	POTW malfunction, i.e. inadequate disinfection		
10		Other: _____		

Item No.	Pts	II. What is the nature of the resource affected? (Points)	Page Number in Narrative	Attachment ID & Page No.
11	5	Public drinking water supply		
		Is alternate supply available? (y/n) _____ (n: +1)		
12	5	Private drinking water supply		
		Is alternate supply available? (y/n) _____ (n: +1)		
13	4	Private homes		
14	4	Public streets or parklands		
15	3	Swimming beaches		
16	2	Boating areas		
17	1	Sensitive population affected		
18	3	Population affected >10,000		
	2	25 – 9,999		
	1	1 – 24		
19		Other: _____		

<b>C. Environmental Criteria</b>					
<b>Item No.</b>	<b>Pts</b>	<b>I. What is the nature of the environmental problem encountered?</b>	<b>(Points)</b>	<b>Page Number in Narrative</b>	<b>Attachment ID &amp; Page No.</b>
20	3	NPDES limits exceeded			
21	3	Aquatic toxicity			
22	2	Nutrients			
23	2	Dissolved oxygen			
24	1	Temperature			
25	2	Bacteria			
26	2	Turbidity			
27	1	Noxious aquatic plants			
28	1	Aesthetics			
29		Other _____			

<b>Item No.</b>	<b>Pts</b>	<b>II. What environmental resource(s) is affected?</b>	<b>(Points)</b>	<b>Page Number in Narrative</b>	<b>Attachment ID &amp; Page No.</b>
30	3	Public water supply – Surface Zone A			
31	3	Public water supply – Groundwater Zone I			
32	2	Outstanding Resource Water (ORW)			
33	2	Area of Critical Environmental Concern (ACEC)			
34	2	Public water supply – Surface Zone B			
35	2	Public water supply – Groundwater Zone II			
36	2	Commercial fishery			
37	2	Endangered species habitat			
38	2	Sole source aquifer			
39	2	Ocean Sanctuary			
40	1	Recreational fishery / shellfish area			
41	1	Federally designated river (scenic, historic, etc.)			
42		Other: _____			

<b>D. Project Effectiveness</b>					
<b>Item No.</b>	<b>Pts</b>	<b>I. How and to what extent will the project eliminate or mitigate the problem?</b>	<b>(Points)</b>	<b>Page Number in Narrative</b>	<b>Attachment ID &amp; Page No.</b>
		Reduces violations of water quality standards			
		Restores designated uses			
		Reduces potential adverse impacts to sensitive resource			
		Protects designated uses			
		Reduces or eliminates public health problems/nuisance			
		Protects public health resources from contamination			
		Other: _____			
43	30	Project substantially eliminates or mitigates problem			
	15	Project moderately mitigates problem			
	0	Project minimally mitigates problem			

<b>E. Program and Implementation Criteria</b>					
<b>Item No.</b>	<b>Pts</b>	<b>I. Consistency with EOE/DEP Watershed Management Plans or priorities</b>	<b>(Points)</b>	<b>Page Number in Narrative</b>	<b>Attachment ID &amp; Page No.</b>
44		Implements a recommendation within:			
	40	- an EOE/DEP Watershed Management Plan			
	35	- a Comprehensive Wastewater Management Plan			
	30	- a TMDL			
	25	- a Project Evaluation Report			
	20	- a Stormwater Management Plan, Water Quality Assessment Report, or Diagnostic/Feasibility Study			
	15	- a local planning study			
	10	- DEP and EOE/DEP watershed regional priority			
45		<b>II. Compliance and enforcement</b>			
	10	Project achieves compliance with enforcement order			
	8	Maintains permit compliance level			
	6	Achieves voluntary compliance (violation w/ no order)			
46		<b>III. Multi-community, regional or basin solution</b>			
	8	Project substantially addresses regional or basin problem			
	6	Project includes significant I/I or stormwater recharge in a high or medium stress basin			
	4	Project moderately addresses regional or basin problem			
	2	Project includes significant I/I or stormwater recharge in a in a low stress/unassessed basin			
47		<b>IV. Innovative / Alternative technology</b>			
	2	Project utilizes DEP-approved I/A technology			
48		<b>V. Pricing system under MGL c.40, s.39J</b>			
	2	Certification attached			
49	—	What is the approved score from the Commonwealth Capital Application Score (or TBD)?			

<b>F. Threshold Criteria</b>		
<b>Item No.</b>	<b>An affirmative answer to either question below will disqualify the project from review</b>	<b>(Yes / No)</b>
50	Indicate whether, and to what extent, the capacity to be provided by the project duplicates existing treatment or disposal capacity already available at an economic cost within the relevant region.	
51	Identify and describe the extent of any potential negative impacts to water quality, water quantity, or to the public health directly attributable to the project, and assess whether and to what extent any such negative impacts outweigh the project's environmental and/or public health benefits.	

<b>Notes:</b>	
<b>Item #</b>	<b>Comments</b>